24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	FOR SE OF FORM 24/48
JAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
DMFI PAC	C C00710848
	0,
Check if X 24-hour report 48-hour report New report Amends report filed	on
Full Name of Payee Trilogy Interactive, LLC	Date of Public Distribution/Dissemination
Non-Contribution Account	04 / 20 / Y Y Y Y Y
Mailing Address PO Box 4177	Amount
City State Zip Code	90175.00
Mountain View CA 94040-0177	Transaction ID: VVBANAR7745 Date of Disbursement or Obligation
Purpose of Expenditure Digital Advertising Buy Category/ Type	04 / 20 / 2022
	e Sought: X House District: 11
BROWN, M SHONTEL, , ,	President Senate State: OH
Calendar Year-To-Date Per Election for Office Sought Disbut 2022	ursement For: ✓ Primary General Other (specify) ✓
Full Name of Payee	Date of Public Distribution/Dissemination
	M = M / D = D / Y = Y = Y
Mailing Address	
	Amount
City State Zip Code	
	Date of Disbursement or Obligation
Purpose of Expenditure Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support Office	e Sought: House District:
Oppose	President Senate State:
04.01.04.10 24.0	ursement For: Primary General
Per Election for Office Sought	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	90175.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	90175.00
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of eithe party committee) any political party committee or its agent.	•
	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	